Filing at a Glance

Companies: American Zurich Insurance Company, American Guarantee and Liability Insurance Company, Zurich

American Insurance Company of Illinois, Zurich American Insurance Company

Product Name: Agency Premium Installment SERFF Tr Num: ZURC-125231534 State: Arkansas

Plan Rule

TOI: 35.0 Interline Filings SERFF Status: Closed State Tr Num: AR-PC-07-025464

Sub-TOI: 35.0002 Commercial Interline Filings Co Tr Num: CW CL 26272 State Status:

Filing Type: Rule Co Status: Not Applicable Reviewer(s): Betty Montesi,

Llyweyia Rawlins, Brittany Yielding

Author: Carole Amato Disposition Date: 07-17-2007

Date Submitted: 07-17-2007 Disposition Status: Exempt from

Review

Effective Date Requested (New): On Approval Effective Date (New): 07-17-2007

Effective Date Requested (Renewal): On Approval Effective Date (Renewal):

General Information

Project Name: Agency Premium Installment Plan Rule CW CL 26272 Status of Filing in Domicile: Project Number: CW CL 26272 Domicile Status Comments:

Reference Organization: Reference Number:
Reference Title: Advisory Org. Circular:

Filing Status Changed: 07-17-2007

State Status Changed: 07-17-2007 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

We are submitting a Premium Paymant Plan for use by our business unit - Zurich Programs. This Payment Plan will enable Zurich Programs' Agents, who have the ability, to send monthly bills to their customers. There are no extra fees or installments that will be charged to the customer. The plan is only applicable to insureds with an annual policy premium of \$30,000 or above.

Company and Contact

Filing Contact Information

Carole Amato, Supervisor carol.amato@zurichna.com 1400 American Lane (847) 413-5235 [Phone] Schaumburg, IL 60196-1056 (847) 605-7768[FAX]

Filing Company Information

American Zurich Insurance Company CoCode: 40142 State of Domicile: Illinois

1400 American Lane Group Code: 212 Company Type:

Schaumburg, IL 60196 Group Name: State ID Number:

(847) 605-6000 ext. [Phone] FEIN Number: 36-3141762

CoCode: 26247

State of Domicile: New York

American Guarantee and Liability Insurance

Company

1400 American Lane Group Code: 212 Company Type: Schaumburg, IL 60196 Group Name: State ID Number:

(847) 605-6000 ext. [Phone] FEIN Number: 36-6071400

Zurich American Insurance Company of Illinois CoCode: 27855 State of Domicile: Illinois

1400 American Lane Group Code: 212 Company Type: Schaumburg, IL 60196 Group Name: State ID Number:

(847) 605-6000 ext. [Phone] FEIN Number: 36-2781080

Zurich American Insurance Company CoCode: 16535 State of Domicile: New York

1400 American LaneGroup Code: 212Company Type:Schaumburg, IL 60102Group Name:State ID Number:

(847) 605-6000 ext. [Phone] FEIN Number: 36-4233459

Filing Fees

Fee Required? Yes
Fee Amount: \$25.00
Retaliatory? No

Fee Explanation:

Per Company: No

CHECK NUMBER CHECK AMOUNT CHECK DATE 3400279244 \$25.00 07-13-2007

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Exempt fro	m Llyweyia Rawlins	07-17-2007	07-17-2007
Review			

Disposition

Disposition Date: 07-17-2007 Effective Date (New): 07-17-2007

Effective Date (Renewal): Status: Exempt from Review

Comment: Per Arkansas Code 23-67-206: Property and casualty insurance for commercial risk, excluding workers compensation, employers liability, and professional liability insurance are exempted from rate and rule filing and review. (see actual code site for details)

Contingent on receiving filing fee.

Rate data does NOT apply to filing.

Item TypeItem NameItem StatusPublic AccessRateAgency Bill - Premium Installment
PaymentsAccepted for
Informational PurposesYes

Rate Information

Rate data does NOT apply to filing.

Rate/Rule Schedule

Review Status: Exhibit Name: Rule # or Page Rate Action Previous State Filing Attachments

#: Number:

Accepted for Agency Bill - Premium New ZP exception.pdf

Informational Installment Payments

Purposes

COMMERCIAL LINES RULE PAGE ZURICH PROGRAMS

AGE	AGENCY BILL – PREMIUM INSTALLMENT PAYMENTS			
ALL LINES EXCEPT WORKERS COMPENSATION				
I.	The premium for any policy is due and payable at the beginning of the policy period, unless the			
	policy is issued on an installment payment basis in accordance with the following rule:			
	Α.	An initial payment is due at inception, with the remainder payable in no more than ten		
		equal installment(s).		
	B.	The minimum premium required to be eligible for installment payments is \$30,000 on an		
		account basis.		
II.	This rule does not apply to workers compensation or captives.			